

Fill in this information to identify the case:

Debtor name Eat Fit Go Arizona Kitchen, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 18-81121

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 17, 2018

X /s/ Brock Hubert

Signature of individual signing on behalf of debtor

Brock Hubert

Printed name

CEO

Position or relationship to debtor

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Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>163,563.38</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>163,563.38</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>0.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>1,236.96</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>1,236.96</u>

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. **Checking, savings, money market, or financial brokerage accounts** (*Identify all*)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Access Bank

Checking

0340

\$6,203.92

4. **Other cash equivalents** (*Identify all*)

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$6,203.92

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. Hartford Life Insurance

\$549.18

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$549.18

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Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 21,272.58 - 0.00 = \$21,272.58
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$21,272.58

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials Food	<u>07/29/2019</u>	<u>\$22,514.86</u>	<u>Recent cost</u>	<u>\$22,514.86</u>

20. **Work in progress**

21. **Finished goods, including goods held for resale**

22. **Other inventory or supplies**

Packaging and Kitch Supplies	<u>07/29/2018</u>	<u>\$34,303.81</u>	<u>Recent cost</u>	<u>\$34,303.84</u>
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23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$56,818.70

24. **Is any of the property listed in Part 5 perishable?**

- ☐ No
☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

☐ No
☒ Yes. Book value 12556.61 Valuation method FIFO Current Value 12556.61

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

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Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture See Attachment A/B	\$44,676.90		\$44,676.90

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$44,676.90

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes Fill in the information below.

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☒ No. Go to Part 11.
☐ Yes Fill in the information below.

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Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**
Description (include name of obligor)
72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

Leasehold Improvements - See Attachment A/B

\$34,042.10

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$34,042.10

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor **Eat Fit Go Arizona Kitchen, LLC**
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Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$6,203.92	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$549.18	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$21,272.58	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$56,818.70	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$44,676.90	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$0.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$34,042.10	
91. Total. Add lines 80 through 90 for each column	\$163,563.38	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$163,563.38

EAT FIT GO GEORGIA KITCHEN- ATTACHMENT A/B

Asset	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value
Group: Equipment									
	36 RE Therm Oven with DX Controls	1/04/17	\$9,122.40	\$0.00	\$0.00	\$1,824.48	\$1,824.48	\$3,648.96	\$5,473.44
	37 Tilit Skillet and Vacuum Tumbler	2/23/17	\$14,490.00	\$0.00	\$0.00	\$2,415.00	\$2,898.00	\$5,313.00	\$9,177.00
	38 Kitchen Cabinetry	3/06/17	\$17,221.83	\$0.00	\$0.00	\$2,870.31	\$3,444.37	\$6,314.68	\$10,907.15
	130 Walk in Cooler	8/07/17	\$14,225.90	\$0.00	\$0.00	\$1,185.49	\$2,845.18	\$4,030.67	\$10,195.23
	133 Dial One Freezer	2/04/18	\$10,925.00	\$0.00	\$0.00	\$0.00	\$2,002.92	\$2,002.92	\$8,922.08
	Equipment		\$65,985.13	\$0.00	\$0.00	\$8,295.28	\$13,014.95	\$21,310.23	\$44,674.90
Group: Leasehold Improvement									
	116 Build Out - Arizona Kitchen	12/31/16	\$43,458.00	\$0.00	\$0.00	\$5,070.10	\$4,345.80	\$9,415.90	\$34,042.10
	Leasehold Improvement		\$43,458.00	\$0.00	\$0.00	\$5,070.10	\$4,345.80	\$9,415.90	\$34,042.10
	Grand Total		\$109,443.13	\$0.00	\$0.00	\$13,365.38	\$17,360.75	\$30,726.13	\$78,717.00

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

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Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

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United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Armstrong, Tyler 4918 Lydia Ave Kansas City, MO 64110 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown Unknown
2.2	Priority creditor's name and mailing address Chacon Gonzalez, Rolando 2508 W Elm St #220 Phoenix, AZ 85017 Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown Unknown

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2.3	Priority creditor's name and mailing address De Young, Autumn 13720 N 88th Ave, Apt #3057 Peoria, AZ 83581	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
2.4	Priority creditor's name and mailing address Demarbieux, Parris J 2327 W Rovey Ave Phoenix, AZ 85015	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
2.5	Priority creditor's name and mailing address DesMarteau, Francois 12905 Inverness Dr Kansas City, MO 64145	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
2.6	Priority creditor's name and mailing address Dettorre, Brittany 5921 W Nancy Rd Glendale, AZ 85306	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	

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2.7	Priority creditor's name and mailing address Dillon, Joseph M 820 E Purdue Ave, Unit A Phoenix, AZ 85020	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Gallegos III, Thomas Joe 4322 W Whitton Ave Phoenix, AZ 85031	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Garza, Jacklyn S 2704 E Shaw Butte Dr. Phoenix, AZ 85028	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Hinkel, Tanner E 6943 Oak St Kansas City, MO 64113	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

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2.11	Priority creditor's name and mailing address Jomarron, Arlety 8040 N 11th Pl Phoenix, AZ 85020	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Jones, Abby 7611 Conser St Overland Park, KS 66204	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Lacy, Kimberly 4455 Madison Ave Kansas City, MO 64111	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Ochoa, Nathaniel 3211 E Marconi Ave Phoenix, AZ 85032	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

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2.15	Priority creditor's name and mailing address Ricardo Aguilera, Ludmila 2508 W Elm St Phoenix, AZ 85017	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address Senthavy, Thasadaphone 20355 Willow Ct Spring Hill, KS 66083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Silva Feria, Viunaiky 3153 W Orchid Ln Phoenix, AZ 85051	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

2.18	Priority creditor's name and mailing address Sons, Robert 3046 W Libby St Phoenix, AZ 85053	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

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2.19	Priority creditor's name and mailing address Stock, Cassie 317 Lake Forest Dr Bonner Springs, KS 66012	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Walker, Kail R 5021 S 196th Circle Omaha, NE 68135	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	Unknown	Unknown
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address Live Well Enterprises, LLC c/o Aaron McKeever 8877 S 137th Cir., Suite 1 Omaha, NE 68138 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown	
-----	--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------	--

3.2	Nonpriority creditor's name and mailing address Rx Bar Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$959.04	
-----	----------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------	--

3.3	Nonpriority creditor's name and mailing address Shamrock PO Box 52438 Phoenix, AZ 52438 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown	
-----	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------	--

Debtor **Eat Fit Go Arizona Kitchen, LLC**
Name

Case number (if known) **18-81121**

3.4 Nonpriority creditor's name and mailing address
Southwest Gas Corporation
PO Box 98890
Las Vegas, NV 89193-8890
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.*

Unknown

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: ____

Is the claim subject to offset? ☒ No ☐ Yes

3.5 Nonpriority creditor's name and mailing address
Staples
PO Box 660409
Dallas, TX 75266-0409
Date(s) debt was incurred ____
Last 4 digits of account number ____

As of the petition filing date, the claim is: *Check all that apply.*

\$277.92

- ☒ Contingent
☒ Unliquidated
☐ Disputed

Basis for the claim: ____

Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 1,236.96
5c.	\$ 1,236.96

Fill in this information to identify the case:

Debtor name **Eat Fit Go Arizona Kitchen, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

Case number (if known) **18-81121**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Linens Contracts**

State the term remaining **Approx. 3 years**

List the contract number of any government contract

**Cintas
CSC-LAWYERS INCORPORATING SERVICE COMPAN
Lincoln, NE 68508**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Disposal Contract**

State the term remaining **3 Month, Annual Renewal**

List the contract number of any government contract

**Curbside Recycling and Disposal
3219 E. Camelback Rd
Phoenix, AZ 85018**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Non-Residential Real Property Lease**

State the term remaining **Approx. 8 Years**

List the contract number of any government contract

**Live Well Enterprises, LLC
c/o Aaron McKeever
8877 S 137th Cir., Suite 1
Omaha, NE 68138**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Pest Control contract.**

State the term remaining **Month to Month**

List the contract number of any government contract

**Sexton Pest Control
Phoenix Branch
14040 N Cave Creek Rd Suite 306
Phoenix, AZ 85022**

Fill in this information to identify the case:

Debtor name Eat Fit Go Arizona Kitchen, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 18-81121

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

- ☐ D
☐ E/F
☐ G

2.1

Street

City State Zip Code

2.2

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G

2.3

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G

2.4

Street

City State Zip Code

- ☐ D
☐ E/F
☐ G

Fill in this information to identify the case:

Debtor name Eat Fit Go Arizona Kitchen, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 18-81121

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:

From 1/01/2018 to Filing Date

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$548,065.04

For prior year:

From 1/01/2017 to 12/31/2017

☒ Operating a business

☐ Other _____

\$880,841.68

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

3.1. **See Attachment 3**

\$0.00

☐ Secured debt
☐ Unsecured loan repayments
☐ Suppliers or vendors
☐ Services
☐ Other _____

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121****4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
------------------------------------------------------	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	-----------------------------------------	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None
Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	-------------------------------------------	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**
☐ None

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121****Description of the property lost and how the loss occurred****Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

Dates of loss**Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer?
Address

If not money, describe any property transferred

Dates

Total amount or value

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.

Name of trust or device

Describe any property transferred

Dates transfers were made

Total amount or value

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer?
Address

Description of property transferred or payments received or debts paid in exchange

Date transfer was made

Total amount or value

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address

Dates of occupancy
From-To

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☐ No. Go to Part 9.

☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
----------------------------------------	---------------------------------	-------------------------------	------------------------------------------------------	-----------------------------------------

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
-----------------------------------------	----------------------------------------------	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
---------------------------	-----------------------------------	-----------------------------	-----------------------

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121**

similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
-----------------------	-------------------------------------	----------------------------------------------------------------------------------------------------------------

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
------------------	----------------------------

26a.1. **See Attachment 26A**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
------------------	----------------------------

26b.1. **See Attachment 26B**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121****Name and address****If any books of account and records are unavailable, explain why**26c.1. **See Attachment 26C**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address26d.1. **See Attachment 26D****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Karl Marsh	07/31/2018	56818.62
	Name and address of the person who has possession of inventory records Eat Fit Go Healthy Foods, LLC 8877 S. 137th Cir Suite 1 Omaha, NE 68138		

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Sam Vakhidov	2325 S. 165th Omaha, NE 68134	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Panorama Point Partners, LLC	13030 Pierce St Ste 300 Omaha, NE 68144	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Jennifer Cain	2325 S. 218th Ave Elkhorn, NE 68022	CEO	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

Debtor **Eat Fit Go Arizona Kitchen, LLC**Case number (if known) **18-81121**

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Sam Vakhidov	2325 S. 165th Omaha, NE 68134	CEO	02/16-10/17
Jennifer Cain	2325 S. 218th Ave Elkhorn, NE 68022	CEO	11/17-07/18

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	------------------------------------------------------	-------	--------------------------------

31. **Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?**

- ☐ No
☒ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
Eat Fit Go Healthy Foods, LLC	EIN: 47-4351685

32. **Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?**

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	----------------------------------------------------------

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **September 17, 2018**

/s/ Brock Hubert

Signature of individual signing on behalf of the debtor

Brock Hubert

Printed name

Position or relationship to debtor **CEO**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☐ No
☒ Yes

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
AAA Backflow Testing & Repair, LLC	Bill Pmt -				
	Check	07/06/2018	P.O. BOX 9344 Surprise, AZ 85374	Memo:CHECK 1279	\$3,660.50
ADP	Check	05/10/2018	PO Box 842875 Boston, MA 02284-2875	ADP Tax ADP Tax 19PDX 051119A01	\$1,939.53
	Check	05/14/2018	PO Box 842875 Boston, MA 02284-2876	ADP Tax ADP Tax 19PDY 051519A01	\$1,097.65
	Bill Pmt -				
	Check	05/18/2018	PO Box 842875 Boston, MA 02284-2877	Memo:CHECK 1246	\$56.25
	Check	05/24/2018	PO Box 842875 Boston, MA 02284-2878	ADP Tax ADP Tax 19PDX 052521A01	\$1,773.13
	Check	05/31/2018	PO Box 842875 Boston, MA 02284-2879	ADP Tax ADP Tax 19PDY 060121A01	\$1,097.64
	Check	06/07/2018	PO Box 842875 Boston, MA 02284-2880	ADP Tax ADP Tax 19PDX 060823A01	\$2,280.14
	Bill Pmt -				
	Check	06/08/2018	PO Box 842875 Boston, MA 02284-2881	Memo:CHECK 1259	\$27.00
	Bill Pmt -				
	Check	06/14/2018	PO Box 842875 Boston, MA 02284-2882	Memo:CHECK 1266	\$20.25
	Check	06/14/2018	PO Box 842875 Boston, MA 02284-2883	ADP Tax ADP Tax 19PDY 061524A01	\$1,097.66
	Check	06/21/2018	PO Box 842875 Boston, MA 02284-2884	ADP Tax ADP Tax 19PDX 062225A01	\$2,343.19
	Check	06/28/2018	PO Box 842875 Boston, MA 02284-2885	ADP Tax ADP Tax 19PDY 062926A01	\$1,097.66
	Bill Pmt -				
	Check	06/29/2018	PO Box 842875 Boston, MA 02284-2886	Memo:CHECK 1274	\$77.00
	Check	07/05/2018	PO Box 842875 Boston, MA 02284-2887	ADP Tax ADP Tax 19PDX 070627A01	\$3,067.02
	Check	07/12/2018	PO Box 842875 Boston, MA 02284-2888	ADP Tax ADP Tax 19PDY 071328A01	\$1,147.64
	Bill Pmt -				
	Check	07/13/2018	PO Box 842875 Boston, MA 02284-2889	Memo:CHECK 1283	\$4.50
	Bill Pmt -				
	Check	07/19/2018	PO Box 842875 Boston, MA 02284-2890	Memo:CHECK 1290	\$24.75
	Check	07/19/2018	PO Box 842875 Boston, MA 02284-2891	ADP Tax ADP Tax 19PDX 072029A01	\$2,432.59
	Bill Pmt -				
	Check	07/27/2018	PO Box 842875 Boston, MA 02284-2892	Memo:CHECK 1296	\$4.50
	Check	07/31/2018	PO Box 842875 Boston, MA 02284-2893	ADP Tax ADP Tax 19PDY 080130A01	\$1,147.66
aps	Bill Pmt -				
	Check	05/18/2018	PO Box 2906 Phoenix, AZ 85062-2906	Acct #3788920000	\$3,400.53
	Bill Pmt -				
	Check	06/14/2018	PO Box 2906 Phoenix, AZ 85062-2907	Memo:CHECK 1267	\$4,720.75

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
Arlety Jomarron	Bill Pmt -				
	Check	07/19/2018	PO Box 2906 Phoenix, AZ 85062-2908	Memo:CHECK 1291	\$4,503.32
Biehl & Biehl, Inc.	Bill Pmt -				
	Check	07/25/2018	8040 N. 11th Pl Phoenix, AZ 85020	Memo:CHECK 1295	\$149.85
Boelter	Bill Pmt -				
	Check	07/06/2018	325 East Fullerton Ave Carol Stream, IL 60188	Memo:CHECK 1280	\$316.89
Brandon C Apodaca	Bill Pmt -				
	Check	05/04/2018	P.O. BOX 8741 Carol Stream, IL 60197-8741	Memo:CHECK 1240	\$3,874.23
	Bill Pmt -				
	Check	05/18/2018	P.O. BOX 8741 Carol Stream, IL 60197-8742	Memo:CHECK 1248	\$50.01
	Bill Pmt -				
	Check	05/23/2018	P.O. BOX 8741 Carol Stream, IL 60197-8743	Memo:CHECK 1252	\$129.75
	Bill Pmt -				
	Check	06/08/2018	P.O. BOX 8741 Carol Stream, IL 60197-8744	Memo:CHECK 1260	\$3,863.79
	Bill Pmt -				
	Check	07/13/2018	P.O. BOX 8741 Carol Stream, IL 60197-8745	Memo:CHECK 1284	\$4,774.18
CenturyLink	Bill Pmt -				
	Check	07/27/2018	P.O. BOX 8741 Carol Stream, IL 60197-8746	Memo:CHECK 1297	\$4,899.97
Cintas	Bill Pmt -				
	Check	06/08/2018	3511 S. Terrace Road Tempe, AZ 85282	Memo:CHECK 1261	\$183.75
Cintas	Bill Pmt -				
	Check	06/29/2018	P.O. Box 4300 Carol Stream, IL 60197	Memo:CHECK 1275	\$102.86
Cintas	Bill Pmt -				
	Check	07/27/2018	P.O. Box 4300 Carol Stream, IL 60198	Memo:CHECK 1298	\$155.56
Cintas	Bill Pmt -				
	Check	05/04/2018	Po Box 29059 Phoenix, AZ 85038-9059	Memo:CHECK 1241	\$392.35
	Bill Pmt -				
	Check	06/08/2018	Po Box 29059 Phoenix, AZ 85038-9060	Memo:CHECK 1262	\$398.85
Cintas	Bill Pmt -				
	Check	07/06/2018	Po Box 29059 Phoenix, AZ 85038-9061	Memo:CHECK 1281	\$415.38

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
Cintas-0466	Bill Pmt - Check	05/10/2018	Po Box 29059 Phoenix, AZ 85038-9061	Memo:CHECK 1243	\$94.82
City of Phoenix	Bill Pmt - Check	06/01/2018	PO Box 29100 Phoenix, AZ 85038-9100	Memo:CHECK 1257	\$368.51
	Bill Pmt - Check	07/13/2018	PO Box 29100 Phoenix, AZ 85038-9101	Memo:CHECK 1285	\$107.49
Curbside Recycling & Disposal	Bill Pmt - Check	05/18/2018	3219 E Camelback Rd #394 Phoenix, AZ 85018	Memo:CHECK 1249	\$200.00
	Bill Pmt - Check	06/22/2018	3220 E Camelback Rd #394 Phoenix, AZ 85018	Memo:CHECK 1270	\$200.00
	Bill Pmt - Check	07/13/2018	3221 E Camelback Rd #394 Phoenix, AZ 85018	Memo:CHECK 1286	\$200.00
Dial One	Bill Pmt - Check	05/18/2018	743 E Dunlap Phoenix, AZ 85020	Memo:CHECK 1250	\$731.34
Diecutstickers	Bill Pmt - Check	06/22/2018	345 Andover Park E. Tukwila, WA 98188	QuickBooks generated zero amount transaction for bill payment stub	
	Bill Pmt - Check	07/31/2018	346 Andover Park E. Tukwila, WA 98188	Memo:CHECK 1301	\$3,396.00
FreightQuote	Bill Pmt - Check	05/23/2018	PO Box 9121 Minneapolis, MN 55480-9121	Memo:CHECK 1253	\$251.85
Hoodz	Bill Pmt - Check	06/29/2018	1220 W Alameda Dr. Suite 107 Tempe, AZ 85282	Memo:CHECK 1276	\$550.00
Hub Labels	Bill Pmt - Check	05/18/2018	18223 Shawley Dr. Hagerstown, MD 21740	Memo:CHECK 1251	\$224.58
	Bill Pmt - Check	06/22/2018	18224 Shawley Dr. Hagerstown, MD 21740	Memo:CHECK 1271	\$1,345.88
	Bill Pmt - Check	06/29/2018	18225 Shawley Dr. Hagerstown, MD 21740	Memo:CHECK 1277	\$364.91

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
Ice King Distribution	Bill Pmt -				
	Check	07/13/2018	18226 Shawley Dr. Hagerstown, MD 21740	Memo:CHECK 1287	\$3,972.82
	Bill Pmt -				
	Check	07/19/2018	18227 Shawley Dr. Hagerstown, MD 21740	Memo:CHECK 1292	\$496.18
Live Well Enterprises	Bill Pmt -				
	Check	07/19/2018	5925 W. Van Buren St Phoenix, AZ 85043	VOID:	
	Check	05/10/2018	8240 Keystone Drive Omaha, NE 68134	Transfer to Live Well Enterprises from Eat Fit Go Healthy Foods	\$7,779.19
	Check	06/11/2018	8241 Keystone Drive Omaha, NE 68134	Transfer to Live Well Enterprises from Eat Fit Go Healthy Foods	\$7,779.19
Maloney Plumbing	Check	07/10/2018	8242 Keystone Drive Omaha, NE 68134	Transfer to Live Well Enterprises from Eat Fit Go Healthy Foods	\$7,779.19
	Bill Pmt -				
	Check	06/08/2018	9119 North 7th Street, Ste #701 Phoenix, AZ 85020	Memo:CHECK 1263	\$275.00
	Bill Pmt -				
ProGuard	Check	07/27/2018	PO Box 804466 Kansas City, MO 64180-4466	Memo:CHECK 1299	\$111.54
	Bill Pmt -				
	Check	05/04/2018	PO Box 70343 Chicago, IL 60673-0343	Memo:CHECK 1242	\$138.48
	Bill Pmt -				
Ready Refresh	Check	06/22/2018	PO Box 70343 Chicago, IL 60673-0344	Memo:CHECK 1272	\$142.62
	Bill Pmt -				
	Check	05/10/2018	6661 Dixie Hwy, Suite 4 Louisville, KY 40258	Memo:CHECK 1244	\$227.83
	Bill Pmt -				
Revel System	Check	06/14/2018	6662 Dixie Hwy, Suite 4 Louisville, KY 40258	Memo:CHECK 1268	\$178.31
	Check	05/01/2018		REVEL SYSTEMS I PAYMENT 62965	\$177.50
	Check	06/04/2018		REVEL SYSTEMS I PAYMENT 62965	\$177.50
	Check	07/03/2018		REVEL SYSTEMS I PAYMENT 62965	\$177.50
RKS Plumbing					

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
RXBar	Bill Pmt -				
	Check	06/22/2018	23659 N 35th Dr Glendale, AZ 85310	Memo:CHECK 1273	\$162.50
Safeguard	Bill Pmt -				
	Check	06/14/2018	PO Box 772943 Chicago, IL 60677-0243	Memo:CHECK 1269	\$2,024.64
	Bill Pmt -				
Sexton Pest Control	Check	07/13/2018	PO Box 772943 Chicago, IL 60677-0244	VOID:	
	Bill Pmt -				
Shamrock Foods	Check	06/01/2018	PO Box 5870 Scottsdale, AZ 85261-5870	Memo:CHECK 1258	\$153.07
	Bill Pmt -				
	Check	05/23/2018	14040 N Cave Creek Rd Suite 306 Phoenix, AZ	Memo:CHECK 1254	\$95.00
	Bill Pmt -				
	Check	06/29/2018	14041 N Cave Creek Rd Suite 306 Phoenix, AZ	Memo:CHECK 1278	\$95.00
Shamrock Foods	Bill Pmt -				
	Check	07/27/2018	14042 N Cave Creek Rd Suite 306 Phoenix, AZ	Memo:CHECK 1300	\$646.00
	Bill Pmt -				
	Check	05/01/2018	2540 N 29th Ave, Phoenix, AZ 85009		\$2,420.59
	Bill Pmt -				
	Check	05/02/2018	2541 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX7542	\$1,793.29
	Bill Pmt -				
	Check	05/04/2018	2542 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX8896	\$1,655.04
	Bill Pmt -				
	Check	05/08/2018	2543 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX7049	\$2,558.72
	Bill Pmt -				
	Check	05/09/2018	2544 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX8865	\$1,623.02
	Bill Pmt -				
	Check	05/11/2018	2545 N 29th Ave, Phoenix, AZ 85009		\$1,976.56
	Bill Pmt -				
	Check	05/15/2018	2546 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX9567	\$2,287.69
	Bill Pmt -				
	Check	05/16/2018	2547 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX2685	\$1,851.65
	Bill Pmt -				
	Check	05/18/2018	2548 N 29th Ave, Phoenix, AZ 85009	SHAMROCK FOODS A SHAMROCK F FTXXXXX0217	\$1,846.33

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	05/22/2018	2549 N 29th Ave, Phoenix, AZ 85009	FTXXXXX5814	\$2,658.75
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	05/23/2018	2550 N 29th Ave, Phoenix, AZ 85009	FTXXXXX9486	\$1,332.54
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	05/25/2018	2551 N 29th Ave, Phoenix, AZ 85009	FTXXXXX7120	\$2,664.95
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	05/30/2018	2552 N 29th Ave, Phoenix, AZ 85009	FTXXXXX0872	\$1,048.26
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	05/30/2018	2553 N 29th Ave, Phoenix, AZ 85009	FTXXXXX2766	\$1,326.78
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/01/2018	2554 N 29th Ave, Phoenix, AZ 85009	FTXXXXX9301	\$2,509.98
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/04/2018	2555 N 29th Ave, Phoenix, AZ 85009	FTXXXXX5519	\$80.69
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/05/2018	2556 N 29th Ave, Phoenix, AZ 85009	FTXXXXX1100	\$1,994.34
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/06/2018	2557 N 29th Ave, Phoenix, AZ 85009	FTXXXXX3414	\$2,187.65
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/08/2018	2558 N 29th Ave, Phoenix, AZ 85009	FTXXXXX1248	\$2,346.27
	Bill Pmt -				
	Check	06/12/2018	2559 N 29th Ave, Phoenix, AZ 85009		\$779.01
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/13/2018	2560 N 29th Ave, Phoenix, AZ 85009	FTXXXXX4948	\$1,990.43
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/15/2018	2561 N 29th Ave, Phoenix, AZ 85009	FTXXXXX8235	\$1,858.32
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/18/2018	2562 N 29th Ave, Phoenix, AZ 85009	FTXXXXX2647	\$60.77
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/20/2018	2563 N 29th Ave, Phoenix, AZ 85009	FTXXXXX2430	\$2,938.20
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/20/2018	2564 N 29th Ave, Phoenix, AZ 85009	FTXXXXX6324	\$3,620.91
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/25/2018	2565 N 29th Ave, Phoenix, AZ 85009	FTXXXXX8613	\$3,819.08
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/26/2018	2566 N 29th Ave, Phoenix, AZ 85009	FTXXXXX3271	\$867.25

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	06/27/2018	2567 N 29th Ave, Phoenix, AZ 85009	FTXXXXX2119	\$2,169.65
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/02/2018	2568 N 29th Ave, Phoenix, AZ 85009	FTXXXXX4066	\$3,830.25
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/03/2018	2569 N 29th Ave, Phoenix, AZ 85009	FTXXXXX5273	\$1,251.87
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/05/2018	2570 N 29th Ave, Phoenix, AZ 85009	FTXXXXX3741	\$1,826.05
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/06/2018	2571 N 29th Ave, Phoenix, AZ 85009	FTXXXXX4601	\$10.99
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/06/2018	2572 N 29th Ave, Phoenix, AZ 85009	FTXXXXX3878	\$3,343.30
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/09/2018	2573 N 29th Ave, Phoenix, AZ 85009	FTXXXXX1509	\$67.88
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/10/2018	2574 N 29th Ave, Phoenix, AZ 85009	FTXXXXX6465	\$750.89
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/11/2018	2575 N 29th Ave, Phoenix, AZ 85009	FTXXXXX7063	\$3,014.02
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/12/2018	2576 N 29th Ave, Phoenix, AZ 85009	FTXXXXX6131	\$178.77
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/16/2018	2577 N 29th Ave, Phoenix, AZ 85009	FTXXXXX5352	\$2,846.02
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/17/2018	2578 N 29th Ave, Phoenix, AZ 85009	FTXXXXX0885	\$2,022.63
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/18/2018	2579 N 29th Ave, Phoenix, AZ 85009	FTXXXXX9171	\$2,411.13
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/23/2018	2580 N 29th Ave, Phoenix, AZ 85009	FTXXXXX8587	\$2,907.50
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/24/2018	2581 N 29th Ave, Phoenix, AZ 85009	FTXXXXX0758	\$1,219.41
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/25/2018	2582 N 29th Ave, Phoenix, AZ 85009	FTXXXXX9508	\$517.62
	Bill Pmt -			SHAMROCK FOODS A SHAMROCK F	
	Check	07/27/2018	2583 N 29th Ave, Phoenix, AZ 85009	FTXXXXX9134	\$3,528.87

Shoes For Crews

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
Southwest Gas Corporation	Bill Pmt -				
	Check	05/23/2018	PO Box 504634 St. Louis, MO 63150-4634	Memo:CHECK 1255	\$859.18
Staples	Bill Pmt -				
	Check	05/10/2018	PO Box 98890 Las Vegas, NV 89193-8890	Memo:CHECK 1245	\$281.30
	Bill Pmt -				
	Check	06/08/2018	PO Box 98890 Las Vegas, NV 89193-8891	Memo:CHECK 1264	\$266.98
	Bill Pmt -				
Sterling	Check	07/06/2018	PO Box 98890 Las Vegas, NV 89193-8892	Memo:CHECK 1282	\$285.77
	Bill Pmt -				
	Check	06/08/2018	PO Box 660409 Dallas, TX 75266-0409	Memo:CHECK 1265	\$270.79
	Bill Pmt -				
	Check	07/13/2018	PO Box 660409 Dallas, TX 75266-0410	VOID:	
Sterling	Bill Pmt -				
	Check	07/19/2018	PO Box 660409 Dallas, TX 75266-0411	VOID:	
	Bill Pmt -				
	Check	05/02/2018		ACH Debit STERLING INSTITU 421784	\$1,737.58
	Bill Pmt -				
	Check	05/09/2018		ACH Debit STERLING INSTITU 422196	\$2,370.50
	Bill Pmt -				
	Check	05/16/2018		ACH Debit STERLING INSTITU 422612	\$1,900.51
	Bill Pmt -				
	Check	05/23/2018		ACH Debit STERLING INSTITU 423031	\$1,950.09
	Bill Pmt -				
	Check	05/31/2018			\$2,268.37
	Bill Pmt -				
	Check	06/06/2018		ACH Debit STERLING INSTITU 423805	\$3,992.27
	Bill Pmt -				
	Check	06/13/2018		ACH Debit STERLING INSTITU 424229	\$2,527.25
	Bill Pmt -				
	Check	06/20/2018		ACH Debit STERLING INSTITU 424597	\$3,393.51
	Bill Pmt -				
	Check	06/27/2018		ACH Debit STERLING INSTITU 425016	\$2,959.01

EAT FIT GO ARIZONA KITCHEN ATTACHMENT 3

Name	Type	Date	Address	Memo	Amount
The Hartford - 30003	Bill Pmt -			ACH Debit STERLING INSTITU STERLING	
	Check	07/09/2018		FOODS INVOICE 425409 DATED 6/26/18	\$3,017.34
	Bill Pmt -				
	Check	07/11/2018		ACH Debit STERLING INSTITU 425775	\$2,896.30
	Bill Pmt -				
	Check	07/18/2018		ACH Debit STERLING INSTITU 426155	\$2,714.69
The Hartford - 30003	Bill Pmt -				
	Check	07/25/2018		ACH Debit STERLING INSTITU 426505	\$3,648.34
The Hartford - 30003	Bill Pmt -				
	Check	05/23/2018	PO Box 783690 Philadelphia, PA 19178-3690	Memo:CHECK 1256	\$916.74
Garza, Jacklyn		07/01/18		Expense Reimbursement	\$44.09
		07/15/18		Expense Reimbursement	\$2.14
		08/01/18		Expense Reimbursement	\$23.93

Attachment 26A

Name	Address	Dates of Service
CFO Systems, LLC	10832 Old Mill Rd #2, Omaha, NE 68154	7/17-12/17, 5/18-6/18
Steier & Prchal, Ltd.	1015 N. 98th Street, Suite 100, Omaha, NE 68114	12/2015-09/2017
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Amy Staley	14516 Fowler Avenue, Omaha, NE 68116	01/2017-05/2018
Whitney Ivanova	7315 Stafford Drive, Council Bluffs, IA 51503	05/2018-Present
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present
Chancy Johnson	1903 Oriole Drive, Bellevue, NE 68123	05/2018-Present
Sydni Bechler	11101 M St, Apt #101, Omaha, NE 68137	03/2017-02/2018
Mike Morgan	5615 S. 174th Street, Omaha, NE 68135	07/2018-Present

Attachment 26B

Name	Address	Dates of Service
CFO Systems, LLC	10832 Old Mill Rd #2, Omaha, NE 68154	07/2017-12/2017
Steier & Prchal, Ltd.	1015 N. 98th Street, Suite 100, Omaha, NE 68114	12/2015-09/2017
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present

Attachment 26C

Name	Address	Dates of Service
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Whitney Ivanova	7315 Stafford Drive, Council Bluffs, IA 51503	05/2018-Present
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present
Chancy Johnson	1903 Oriole Drive, Bellevue, NE 68123	05/2018-Present
Mike Morgan	5615 S. 174th Street, Omaha, NE 68135	07/2018-Present

Attachment 26D

Name	Address
Panorama Point Partners LLC	13030 Pierce Street, Suite 300, Omaha, NE 68144
Access Bank	2710 South 140th Street, Omaha, NE 68144